U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 18012		2. Fiscal Year Covered From:	
		1 / 1 / 2004 Through: [12 / 31 / 2004]	
3. Name and address of person filir	ng.	Name, file number, and address of labor organization.	
Name Daniel	G Farbrother	Name Teamsters Local #20	
		Labor Organization File Number 008-580	
P.O. Box, Bldg., Room No., if any		P.O. Box, Building and Room Number, if any	
Street 435 S. Hawley	West of the Control o	Street 435 S. Hawley	
City Toledo	A CANALAN CARRACTURE CONTRACTOR C	City Toledo	
State Ohio	ZIP Code + 4 43609	State Ohio ZIP Code + 4 43609	
5. Position in labor organization.	ecretary/Treasurer		
A. Held an interest in, engaged in	(except as specified in the exclu-	derived income or other economic benefit of the presents or is actively seeking to represent.	
A. Held an interest in, engaged in monetary value from an employ	(except as specified in the exclu- n transactions (including loans) with, or er whose employees your organizati	usions set forth in the instructions): derived income or other economic benefit of	
A. Held an interest in, engaged in monetary value from an employ	(except as specified in the exclu- n transactions (including loans) with, or er whose employees your organizati	derived income or other economic benefit of ion represents or is actively seeking to represent.	
A. Held an interest in, engaged in monetary value from an employ 6. Name and address of Employer (in the content of the conte	(except as specified in the exclu- n transactions (including loans) with, or er whose employees your organizati	derived income or other economic benefit of ion represents or is actively seeking to represent.	
A. Held an interest in, engaged in monetary value from an employ 6. Name and address of Employer (in Name	(except as specified in the exclu- n transactions (including loans) with, or ver whose employees your organization including trade name, if any).	derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.	
A. Held an interest in, engaged in monetary value from an employ 6. Name and address of Employer (in Name 1.5) Trade Name, if any:	(except as specified in the exclu- n transactions (including loans) with, or ver whose employees your organization including trade name, if any).	derived income or other economic benefit of ion represents or is actively seeking to represent.	
A. Held an interest in, engaged in monetary value from an employ 5. Name and address of Employer (in Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	(except as specified in the exclu- n transactions (including loans) with, or ver whose employees your organization including trade name, if any).	derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.	
A. Held an interest in, engaged in monetary value from an employ 6. Name and address of Employer (in Name 1) Trade Name, if any: P.O. Box, Bldg., Room No., if any	(except as specified in the exclu- n transactions (including loans) with, or er whose employees your organization including trade name, if any).	derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.	
A. Held an interest in, engaged in monetary value from an employ 6. Name and address of Employer (in Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City	(except as specified in the exclu- n transactions (including loans) with, or- rer whose employees your organization including trade name, if any). ZIP Code + 4	derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.	
A. Held an interest in, engaged in monetary value from an employ 6. Name and address of Employer (in Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State	(except as specified in the exclu- n transactions (including loans) with, or er whose employees your organization including trade name, if any). ZIP Code + 4 Sign The undersigned declares, under penalty of	derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.	

Name of Person Filing Daniel Farbrother		File Number U -	
B. Held an interest in or derived income or economic benefit with monetary substantial part of which consists of buying from, selling or leasing to, or of of an employer whose employees your labor organization represents or is (2) any part of which consists of buying from or selling or leasing directly or dealing with your labor organization or with a trust in which your labor organization.	herwise dealing with the busines actively seeking to represent, or rindirectly to, or otherwise	s	
Name and address of Business (including trade name, if any).	9. Business deals with:		
Name !	440 A Johnson		
Trade Name, if any:	a. Labor Organiza	tion	
P.O. Box, Bldg., Room No., if any	b. Trust		
Street	c. Employer		
City	of the control of the		
State ZIP Code + 4	enterory of the state of the st		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deali	ng.	
Name	And Cally of the C	TO THE PARTY OF TH	
Trade Name, if any:	A Comment or a comment of the commen	The Annual Property of the Pro	
P.O. Box, Bldg., Room No., if any	Account and a contract and a contrac		
Street	11 h Approximate dellar rah	on of each deciling	
City ·	**	11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received.	
State ZIP Code + 4	Acres (1)-p	4	
	ATT TO THE TAXABLE TO A MARKET	A contract of the contract of	
	and the same of th	The state of the s	
		THE RESERVE A MARKET AND ADMINISTRATE VARIABLE V	
	12.b. Amount.	For an about the state of the s	
C. Received from any employer (other than an employer covered upor from any labor relations consultant to an employer any payment of more	nder parts A and B above) sey or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.	W TORMER AMERICA (TOR)	
(including trade name, if any).	Greens fee, cart, and dinner in connection with trustees' board meeting.		
Name Shumaker, Loop & Kendrick LLP	The second secon	or the second se	
Trade Name, if any:	Tr. Classification of the Control of	mary plane of John Puring	
P.O. Box, Bldg., Room No., if any	And the second s	d making purity by a few fields and the few fields	
Street 1000 Jackson Avenue	The state of the s	THE STATE OF THE S	
City Toledo	(Paper or comment or c	e .	
State Ohio ZIP Code + 4 43624-1573	, , , , , , , , , , , , , , , , , , ,	2 C 10 C 1	
13.b. Is the Business an Employer X or Consultant ?	14.b. Amount of payment.	\$132	

Name of Person Filing	Daniel	Farbrother

File Number U-

Part C Continuation Page

C. Received from any employer (other than an employer covered under parts payment of money or other thing of value.	A and B above) or from any labor relations consultant to an employer any		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name Teamsters Local #20 Insurance H & W Plan	Payment made for registration and room deposit for the International Foundation of Employee Benefit Plans Annual Educational Conference.		
Trade Name, if any:	The state of the s		
P.O. Box, Bldg., Room No., if any			
Street 435 S Hawley Street			
City Toledo			
State Ohio ZIP Code + 4 43609			
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment. \$1,310		
C. Received from any employer (other than an employer covered under parts payment of money or other thing of value.	A and B above) or from any labor relations consultant to an employer any		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State ZIP Code + 4			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.		
C. Received from any employer (other than an employer covered under parts payment of money or other thing of value.	A and B above) or from any labor relations consultant to an employer any		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State ZIP Code + 4	3		
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.		